IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of

Sakamoto, et al.

RECEIVED
CENTRAL FAX CENTER

Serial No.:

10/014,508

Group Art Unit

2826

OCT 1 3 2004

Filed:

December 14, 2001

Examiner:

Erdem, Fazli

For:

LIQUID CRYSTAL DISPLAY DEVICE

Honorable Commissioner of Patents Alexandria, VA 22313-1450

AMENDMENT UNDER 37 C.F.R. \$1.111

Sir:

In response to the Office Action dated July 13, 2004, please amend the above-identified application as follows:

10/20/2004 TYOUNG

00000003 500481 10014508

01 FC:1201

264.00 DA

BEST AVAILABLE COPY

FOR NUMBER EXTRA NUMBER FILED BASIC FEE TOTAL CHARGEABLE CLAIMS minus 20= X\$ 9= INDEPENDENT CLAIMS minus 3 = É X43 = MULTIPLE DEPENDENT CLAIM PRESENT +145= If the difference in column 1 is less than zero, enter "0" in column 2 REST AVAILABLE CLAIMS AS AMENDED - PART II (Column 1) (Column 3) CLAIMS HIGHEST REMAINING AMENDMENT NUMBER PRESENT AFTER **PREVIOUSLY EXTRA** AMENDMENT PAID FOR Tota! Minus Independent Minus FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST REMAINING NUMBER PRESENT: PREVIOUSLY AFTER EXTRA AMENDMENT PAID FOR Total Minus Independent Minus ۵, FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

(Column 1)

(Column 2)

(Column 3)

PRESENT

EXTRA

+145=

ADDIT. FEE

TOTAL

(Column 2)

HIGHEST

NUMBER

PREVIOUSLY

PAID FOR

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

44

CLAIMS AS FILED - PART I

TOTAL CLAIMS

TOTAL		- [_] OI	R TOTAL		
OTHER TI-IAN SMALL ENTITY OR SMALL ENTITY						
1	RATE	ADDI- TIONAL FEE	-]	RATE	ADDI- TIONAL FEE	
	X\$ 9=	1	OF	X\$18=		
	X43 <i>=</i>		OR	X86-		
:	+145 =		OR	+240=		
AD	TOTAL DIT. FEE		OR	ADDIT. PE		
	RATE.	ADDI- TIONAL FEE		RATE	ADBI- TIONAL FEE	
•	K\$ 9=		OR	X\$18=		
7	X43=		OR.	XII =	200	
+	145=		OR	+2€ 0=		
ADC	TOTAL OR ADDIT. FEE ADDIT. FEE					
R	ATE	ADDI- TIONAL FEE	:	RATE	ADDI- TIONAL FEE	
X	\$ 9=		OR	X\$18=		
Х	43=		OR	X8 6 =		
	•					

Application or Docket Number

OTHER THAN

FEE

5770

OR' SMALL EPYTITY

RATE

BASIC FEE

X\$18=

X86=

+290=

OR

OR

OR

OR

SMALL ENTITY

FEE

\$385

TYPE C

RATE

Total.

Independent -

(Colymn 1)

CLAIMS

REMAINING

AFTER

AMENDMENT

Minus

Minus

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

OR

TOTAL

ADDIT. FEE